

## **V. Administrative Requirements**

### **A. Notification of Business Partner Contact**

Business Partners must submit a notification of Business Partner Contact. The letter should identify the contact person for the solicitation process, plus a phone and fax number. There is to be only one (1) contact person. It shall be the Business Partner's responsibility to immediately notify the State Department Official, in writing, regarding any revision to the information pertaining to the designated contact person.

### **B. Confidentiality**

To preserve the integrity of the security and confidentiality measures integrated into the state's information systems, each Business Partner is required to sign a Confidentiality Statement attached as **Exhibit V-A** and submit it to the Department Official identified in Section I.

Similarly, any contractor and each of their employees engaging in services to an agency related to this SCP and the resulting contract, requiring them to come into contact with confidential agency information, will be required to exercise security precautions for such data that they may come in contact with.

### **C. Disabled Veteran Business Enterprise (DVBE)**

State law requires that state contracts have participation goals of 3% for disabled veteran business enterprises (DVBEs).

PLEASE READ THIS REQUIREMENT CAREFULLY. FAILURE TO COMPLY WITH THE DVBE REQUIREMENT MAY CAUSE YOUR SOLICITATION RESPONSE TO BE DEEMED NONRESPONSIVE AND YOUR FIRM INELIGIBLE FOR AWARD OF THE PROPOSED CONTRACT.

Review the instruction and complete the forms in Exhibit V-J.

Note: The advertising requirement is exempted for this solicitation.

### **D. TARGET AREA CONTRACT PREFERENCE (TACPA)**

Preference will be granted to California-based Business Partners in accordance with California Code Section 4530 whenever contracts for goods or services are in excess of \$100,000 and the Business Partners meet certain requirements as defined in the California Administrative Code (Title 2, Section 1896.30 et seq.) regarding labor needed to provide the services being procured. Business Partner questions regarding this preference are to be directed to:

Department of General Services  
Office of Small and Minority Business  
1531 I Street, 2nd Floor  
Sacramento, CA 95814-2016

Telephone (916) 322-5060

Business Partners desiring to claim this preference must submit a fully executed copy of **EXHIBIT V-B** with their Final Proposal.

***E. EMPLOYMENT AND ECONOMIC INCENTIVE ACT PREFERENCE (EEIA)***

Whenever the state prepares a solicitation for goods or services contracting in excess of \$100,000, except a contract in which the worksite is fixed by the provisions of the contract, the state shall award a 5 percent enterprise zone worksite preference to certain California-based companies. The California-based company must certify under penalty of perjury that no less than 50% of the labor required to perform the contract shall be accomplished at a worksite or worksites located in a designated Enterprise Zone (CCR, Title 2, Section 1896.74). The Department of Commerce can assist prospective bidders by checking worksite addresses against a master list of enterprise zone addresses.

Business Partners desiring to claim this preference must review the instructions and complete the appropriate form in **EXHIBIT V-C**.

***F. Vendor Data Record, STD. 204***

The successful Business Partner as a result of this SCP will be required to sign the Vendor Data Record, STD. 204 (**EXHIBIT V-D**), before contract award.

***G. Federal Debarment***

The Federal Department of Labor requires that state agencies which are expending Federal funds of \$25,000 or more to have in the contract file a certification by the contractor that they have not been debarred or suspended from doing business with the Federal Government. Each Business Partner must certify compliance by submitting a fully executed copy of **Exhibit V-E** with their final proposal.

***H. Non-Discrimination Toward WTO GPA Signatories***

This solicitation is subject to the requirements of the World Trade Organization (WTO) Government Procurement Agreement (GPA). All Business Partners offering products or services of countries that are signatories to the WTO GPA and that have agreed to cover reciprocal subcentral coverage under the WTO GPA will be accorded non-discriminatory treatment in the award of contracts under this solicitation. These countries currently include the member states of the European Union (Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Netherlands, Portugal, Spain, Sweden, and the United Kingdom), Israel, Japan, Korea, Norway, and Switzerland.

**I. Subcontractors**

Business Partners are to list all subcontractors (including resellers, if the Business Partner establishes reselling agreements) to be used on **Exhibit V-I** with a description of the service(s) they will perform. The final proposal should include a letter from each subcontractor/reseller listed, signed by an individual authorized to bind the subcontractor contractually, confirming participation for the services listed in **Exhibit V-I**.

**J. Small Business Participation**

The evaluation criteria of this SCP includes significant utilization of certified small businesses as a positive factor (See Section VII). Business Partners should indicate on **Exhibit V-I** if the subcontractor is a small business and the amount of work committed to the small business.

**K. CONTRACTOR'S LICENSE**

Contractors and subcontractors performing cable and/or wiring installation work or structural modifications for the state are required to have the appropriate State Contractor's License. The License must be in the name of the company or the name of the "qualifying individual" of the company. Complete **EXHIBIT V-F**, Contractor's License Information.

The Business Partner certifies under penalty of perjury, the accuracy of the representations made with regard to the contractor's license number, class, and expiration date.

The Contractor shall pay the prevailing rate of wages for regular, overtime, and holiday work plus employer payments for benefits generally prevailing in the locality in which the work is performed, for all crafts, classifications or types of workmen used on state premises at the point of delivery by the Contractor for the assembly and installation of material purchased under this contract.

**L. PUBLIC WORKS REQUIREMENTS (APPLICABLE TO INSTALLATION ONLY)**

1. In accordance with the provisions of Section 1773 of the California Labor Code, the Contractor shall conform and stipulates to the general prevailing rate of wages, including employer benefits as defined in Section 1773.1 of the California Labor Code, applicable to the classes of labor to be used for public works such as at the delivery site for the assembly and installation of the equipment of materials purchased under the contract.

Pursuant to Section 1770 of the California Labor Code, the Department of Industrial Relations has ascertained the general prevailing rate of wages in the county in which the work is to be done, to be as listed in the Department of Transportation booklet entitled General Prevailing Wage Rates. The booklet is required to be posted at the job site. Contact the Department of Industrial Relations, Prevailing Wage Unit at (415) 972-8628.

2. Prior to the commencement of performance of a specific installation, the Contractor must obtain and provide to the state, a payment bond, on STD 807 when the contract involves a public works expenditure (labor/installation costs) in excess of \$5,000.00. Such bond shall be in a sum not less than one-half the contract price for the public works portion of the labor/installation costs. Forms will be made available to the Contractor.
3. Each Business Partner shall submit with their proposal a list of proposed subcontractors or indicate that none are to be used. See **EXHIBIT V-G**. The state reserves the right to approve or object to the use of proposed subcontractors on the list. Subcontractors to be used for future additional work defined via a Form 20 (or other form developed by the state) will be listed on that form at the time the work is defined, rather than on Exhibit V-G. All subcontractors performing Public Works tasks for the implementation phase must be listed on Exhibit V-G.
4. Each Business Partner must certify that it is aware of the provisions of Section 3700 of the California Labor Code which requires every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that Code, and will comply with such provisions before commencing with the performance of work of this contract. A Workers' Compensation Certification must be completed and submitted with an original signature with the bidder's Final Bid. See **EXHIBIT V-H**.

5. Laws To Be Observed

a) Labor

Pursuant to Section 1775 of the California Labor Code, the Contractor shall, as a penalty to the state or political subdivision on whose behalf the contract is made or awarded, forfeit not more than fifty dollars (\$50) for each calendar day, or portion thereof, for each worker paid by the Contractor, or its subcontractor, less than the prevailing wage rates as determined by the Director of Industrial Relations; and in addition, the Contractor further agrees to pay to each worker the difference between the actual amount paid for each calendar day, or portion thereof, and the prevailing wage rate for the same. This provision shall not apply to properly registered apprentices.

Pursuant to Sections 1810-1815 of the California Labor Code, inclusive, it is further agreed that the maximum hours a worker is to be employed is limited to eight hours a day and forty hours a week and the Contractor shall forfeit, as a penalty to the state, twenty-five dollars (\$25) for each worker employed in the execution of the contract for each calendar day during which a worker is required or permitted to labor more than eight hours in any calendar day or more than forty hours in any calendar week, in violation of Sections 1810-1815 of the California Labor Code, inclusive.

b) Travel and Subsistence Payments

The Contractor shall pay the travel and subsistence of each worker needed to execute the work, as such travel and subsistence payments are defined in the applicable collective bargaining agreements filed in accordance with California Labor Code Section 1773.8

c) Apprentices

Special attention is directed to Sections 1777.5, 1777.6, and 1777.7 of the California Labor Code and Title 8, California Code of Regulations Section 200 et seq. Each Contractor and/or subcontractor must, prior to commencement of the public works contract, contact the Division of Apprenticeship Standards, 45 Fremont Street, San Francisco, CA, or one of its branch offices to insure compliance and complete understanding of the law regarding apprentices and specifically the required rationale thereunder. Responsibility for compliance with this section lies with the prime Contractor.

d) Payroll

The Contractor shall keep an accurate payroll record showing the name, address, Social Security Account Number, work classification and straight time and overtime hours worked by each employee. A certified copy of the employee's payroll record shall be made available for inspection as specified in Section 1776 of the California Labor Code.

***M. Priority Hiring Considerations***

If this solicitation results in a contract for services in excess of \$200,000, the contractor shall give priority consideration in filling vacancies in positions funded by the contract to qualified recipients of aid under Welfare and Institutions Code Section 11200 in accordance with Public Contract Code Section 10353.

**N. Exhibit V-A - CONFIDENTIALITY STATEMENT**

As an authorized representative and/or corporate officer of the company named below, I warrant my company and its employees will not disclose any documents, diagrams, information and information storage media that has been identified as confidential by the state and made available to us by the state for the purpose of responding to SCP DGS-7011 or in conjunction with any contract arising therefrom. I warrant that only those employees who are authorized and required to use such materials will have access to them.

I further warrant that all materials provided by the state and identified as confidential will be returned promptly after use and that all copies or derivations of the materials will be physically and/or electronically destroyed. I will include with the returned materials, a letter attesting to the complete return of material, and documenting the destruction of copies and derivations. Failure to so comply will subject this company to liability, both criminal and civil, including all damages to the state and third parties. I authorize the state to inspect and verify the above.

I warrant that if my company is awarded the contract, it will not enter into any agreements or discussions with a third party concerning such materials prior to receiving written confirmation from the state that such third party has an agreement with the state similar in nature to this one.

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(Signature of representative)

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(Date)

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(Typed name of representative)

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(Typed name of Company)

**O. EXHIBIT V-B - TARGET AREA CONTRACT PREFERENCE  
REQUEST**

**(Insert STD 830S Form - TARGET AREA CONTRACT PREFERENCE  
REQUEST)**



**P. EXHIBIT V-C - EMPLOYMENT AND ECONOMIC INCENTIVE ACT (EEIA)**

**EEIA ENTERPRISE ZONE WORK FORCE PREFERENCE**

If bidders qualify for the 5 percent enterprise zone worksite preference, additional preference points are available. Preference points will also be given to firms that hire employees from a high density unemployment area, or are qualified enterprise zone employees, as established in specifications or instructions at the time of bid solicitation date (CCR, Title 2, Section 1896.75).

When a bidder complies with the provisions of the Act, the state shall award the following preferences:

- A 1-percent preference if the bidder agrees to hire persons living within a high density unemployment area as defined in Government Code Section 7082, or are qualified enterprise zone employees, at a rate equal to five to nine percent of the work force during the period of contract performance.
- A 2-percent preference if the bidder agrees to hire persons living within a high density unemployment area as defined in Government Code Section 7082, or are qualified enterprise zone employees, at a rate equal to 10 to 14 percent of the work force during the period of contract performance.
- A 3-percent preference if the bidder agrees to hire persons living within a high density unemployment area as defined in Government Code Section 7082, or are qualified enterprise zone employees, at a rate equal to 15 to 19 percent of the work force during the period of contract performance.
- A 4-percent preference if the bidder agrees to hire persons living within a high density unemployment area as defined in Government Code Section 7082, or are qualified enterprise zone employees, at a rate equal to 20 percent or more of the work force during the period of contract performance.

The total of all preferences a bidder may be awarded shall not exceed 15 percent. The maximum EEIA award preference shall not exceed \$50,000, for any bid. Additionally, the combined cost of preferences granted pursuant to this Act or any other provision of law shall not exceed \$100,000, (Government Code Section 7098).

**EEIA ENTERPRISE ZONE TAX INCENTIVES**

Certain tax incentives are also available to those businesses that qualify under this Act. Prospective bidders should contact the Department of Commerce at (916) 324-8211 for assistance in identifying persons living in high density unemployment areas or qualified enterprise zone employees under the Act, or to check worksite addresses against a master list of enterprise zone addresses. Furthermore, information on state hiring tax credits is available from the Department of Commerce. The mailing address is:

Department of Commerce

Enterprise Zone Program  
801K Street, 17th Floor  
Sacramento, CA 95814

The Department of Commerce will refer prospective bidders to a local enterprise zone coordinator for assistance.

### EEIA PROCEDURES

#### I. Agency/Department Responsibilities:

Each agency is responsible for monitoring contractors who receive contracts based upon the EEIA and ensuring that each contractor complies with the provisions of the Act in the performance of his/her duties.

#### II. Bidder Responsibilities:

Bidders seeking to obtain an EEIA preference must submit a completed Std. Form 831S/G with the bid or proposal. Bidders proposing to perform the contract in a designated enterprise zone are required to identify such site(s) on the Std. Form 831S/G. Failure to identify a site(s) which qualifies as an enterprise zone will result in denial of the claimed preferences.

A bidder who has claimed an EEIA preference and is awarded the contract based on such preference(s) will be obligated to perform the contract in accordance with the Act.

#### III. Contractor Responsibilities:

Contractor agrees to comply with the requirements of the Employment and Economic Incentive Act (Government Code section 7080, et seq.) and attendant rules and regulations. (Title 2, California Code of Regulations, section 1896.70, et seq.).

Contractor agrees that the state contracting agency, or its delegee, will have the right to review, obtain, and copy all records pertaining to performance of the contract. Contractor agrees to provide the state contracting agency or its delegee with any relevant information requested and shall permit the state contracting agency or its delegee access to its premises, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such books, records, accounts, and other material that maybe relevant to a matter under investigation for the purpose of determining compliance with the Act and attendant rules and regulations. Contractor further agrees that such records shall be maintained for a period of three (3) years after final payment under the contract.

Contractor agrees with respect to a certification to hire persons living in a high density unemployment area or "enterprise zone qualified employees", to:

Act in good faith for the purpose of maintaining such persons as employees for the duration or contract performance; and

Make a reasonable effort to replace such persons, who for any reason permanently cease to be on the payroll, with other persons living in a high density

unemployment area or “enterprise zone qualified employee”; and

Promptly report to the state contracting agency and thereafter confirm in writing within seven (7) days the names of any such persons who have been terminated or absent from work for more than three (3) consecutive work days and to communicate the reasons for the termination or absence. The contractor agrees under such circumstances to consult with the state contracting agency and the Department of Commerce with respect to replacement of such persons.

**(Insert STD 831S Form - ENTERPRISE ZONE PREFERENCE REQUEST)**

## Q. Exhibit V-D - VENDOR DATA RECORD

(Required in lieu of IRS W-9 when doing business with the State of California)

**NOTE: Governmental entities, federal, state, and local (including school districts) are not required to submit this form.**

SECTION 1 must be completed by the requesting state agency before forwarding to the vendor.

1	<b>PLEASE RETURN TO:</b>	DEPARTMENT/OFFICE / STREET ADDRESS CITY, STATE, ZIP CODE , , TELEPHONE NUMBER (    )    -	<b>PURPOSE:</b> Information contained in this form will be used by state agencies to prepare Information Returns (Form 1099) and for withholding on payments to nonresident vendors. Prompt return of this fully completed form will prevent delays when processing payments. <b>(See Privacy Statement on reverse)</b>
2 VENDOR'S BUSINESS NAME			
SOLE PROPRIETOR - ENTER OWNER'S FULL NAME HERE ( <i>Last, First, M.I.</i> )			
MAILING ADDRESS ( <i>Number and Street or P.O. Box Number</i> )			
( <i>City, State, and Zip Code</i> )			
3	<b>VENDOR ENTITY TYPE</b>	CHECK ONE BOX ONLY <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> <b>MEDICAL CORPORATION</b> (<i>Including dentistry, podiatry, psychotherapy, optometry, chiropractic, etc.</i>)  <input type="checkbox"/> <b>EXEMPT CORPORATION</b> (Non-profit)  <input type="checkbox"/> <b>ALL OTHER CORPORATIONS</b> </div> <div style="width: 45%;"> <input type="checkbox"/> <b>PARTNERSHIP</b>  <input type="checkbox"/> <b>ESTATE OR TRUST</b>  <input type="checkbox"/> <b>INDIVIDUAL/SOLE PROPRIETOR</b> </div> </div>	<b>NOTE:</b> State and local governmental entities, including school districts are not required to submit this form
4.	<b>VENDOR'S TAXPAYER I.D. NUMBER</b>	SOCIAL SECURITY NUMBER REQUIRED FOR INDIVIDUAL/SOLE PROPRIETOR BY AUTHORITY OF THE REVENUE AND TAXATION CODE SECTION 18646 ( <i>See reverse</i> ) FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN)      SOCIAL SECURITY NUMBER <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; text-align: center;">       -                 </div> <div style="width: 45%; text-align: center;">         -       -         </div> </div> IF VENDOR ENTITY TYPE IS A CORPORATION, PARTNER- SHIP, ESTATE OR TRUST, ENTER <b>FEIN</b> .      IF VENDOR ENTITY TYPE IS INDIVIDUAL/SOLE PROPRIETOR, ENTER <b>SSN</b> .	<b>NOTE:</b> Payment will not be processed without an accompanying taxpayer I.D. number.
5.	<b>VENDOR RESIDENCY STATUS</b>	CHECK APPROPRIATE BOX(S) <input type="checkbox"/> California Resident - Qualified to do business in CA or a permanent place of business in CA. <input type="checkbox"/> Non resident ( <i>See Reverse</i> ) Payments for services by nonresidents may be subject to state withholding <input type="checkbox"/> WAIVER OF STATE WITHHOLDING FROM FRANCHISE TAX BOARD ATTACHED <input type="checkbox"/> SERVICES PERFORMED OUTSIDE OF CALIFORNIA	<b>NOTE:</b> a. An estate is a resident decedent was a California resident at time of death. b. A trust is a resident if at least one trustee is a California resident. ( <i>See reverse.</i> )
<b>I hereby certify under penalty of perjury that the information provided on this document is true and correct. If my residency status should change, I will promptly inform you.</b>			
AUTHORIZED VENDOR REPRESENTATIVE'S NAME ( <i>Type or Print</i> )		TITLE	
SIGNATURE 		DATE	TELEPHONE NUMBER

## VENDOR DATA RECORD (REVERSE)

### ARE YOU A RESIDENT OR A NONRESIDENT?

Each corporation, individual/sole proprietor, partnership, estate or trust doing business with the State of California must indicate their residency status along with their vendor identification number.

A corporation will be considered a "resident" if it has a permanent place of business in California. The corporation has a permanent place of business in California if it is organized and existing under the laws of this state or, if a foreign corporation has qualified to transact intrastate business. A corporation that has not qualified to transact intrastate business (e.g., a corporation engaged exclusively in interstate commerce) will be considered as having a permanent place of business in this state only if it maintains a permanent office in this state that is permanently staffed by its employees.

For individuals/sole proprietors, the term "resident" includes every individual who is in California for other than a temporary or transitory purpose and any individual domiciled in California who is absent for a temporary or transitory purpose. Generally, an individual who comes to California for the purpose which will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.

For withholding purposes, a partnership is considered a resident partnership if it has a permanent place of business in California. An estate is considered a California estate if the decedent was a California resident at the time of death and a trust is considered a California trust if at least one trustee is a California resident.

More information on residency status can be obtained by calling the Franchise Tax Board at the numbers listed below:

From within the United States, call 1-800-852-5711

From outside the United States, call 1-916-854-6500

For hearing impaired with TDD, call 1-800-822-6268

### ARE YOU SUBJECT TO NONRESIDENT WITHHOLDING?

Payments made to nonresident vendors, including corporations, individuals, partnerships, estates and trusts, are subject to withholding. Nonresident vendors performing services in California or receiving rent, lease or royalty payments from property (real or personal) located in California will have 7% of their total payments withheld for state income taxes. However, no withholding is required if total payments to the vendor are \$1500 or less for a calendar year.

A nonresident vendor may request that income taxes be withheld at a lower rate or waived by sending a completed form FTB 588 to the address listed below. A waiver will generally be granted when a vendor has a history of filing California returns and making timely estimated payments. If the vendor activity is carried on outside of California or partially outside of California, a waiver or reduced withholding rate may be granted. For information, contact

Franchise Tax Board  
Withhold at Source Unit  
Attention: State Agency Withholding Coordinator  
P.O. Box 651  
Sacramento, CA 95812-0651  
Telephone: (916) 845-4900  
FAX: (916) 845-4831

**If a reduced rate of withholding or waiver has been authorized by the Franchise Tax Board, attach a copy to this form.**

## PRIVACY STATEMENT

Section 7(b) of the Privacy Act of 1974 (Public Law 93-5791) requires that any federal, state, or local governmental agency which requests an individual to disclose his social security account number shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it.

The State of California required that all parties entering into business transactions that may lead to payment(s) from the State must provide their Taxpayer Identification Number (TIN) as required by the State Revenue and Taxation Code, Section 18646 to facilitate tax compliance enforcement activities and to facilitate the preparation for Form 1099 and other information returns as required by the Internal Revenue Code, Section 6109(a). The TIN for individual and sole proprietorships is the Social Security Number (SSN).

It is mandatory to furnish the information requested. Federal law requires that payments for which the requested information is not provided be subject to a 31% withholding and state law imposes noncompliance penalties of up to \$20,000.

You have the right to access records containing your personal information, such as your SSN. To exercise that right, please contact the business services unit or the accounts payable unit of the state agency(ies) with which you transact business.

Please call the Department of Finance, Fiscal Systems and Consulting Unit at (916) 324-0385 if you have any questions regarding this Privacy Statement. Questions related to residency or withholding should be referred to the telephone numbers listed above. All other questions should be referred to the requesting agency listed in Section 1.

**R. EXHIBIT V-E - CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION LOWER TIER COVERED TRANSACTIONS**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR, Part 98, Section 98.510. Participant's responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

**(BEFORE COMPLETING CERTIFICATION, READ THE INSTRUCTION ON THE BACK WHICH ARE AN INTEGRAL PART OF THE CERTIFICATION)**

- 1) The prospective recipient of Federal assistance funds certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- 2) Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

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Name and Title of Authorized Representative

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Signature

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Date

## Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of Federal assistance funds is providing the certification as stated below.
2. The certification in this class is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances
4. The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntary excluded”, as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this proposal that, should the proposal covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this proposal that it will include the clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions,” without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier cover transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may but is not required to check the List of Parties Excluded from Procurement or Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the DOL may pursue available remedies, including suspension and/or debarment.



**S. EXHIBIT V-F - CONTRACTOR'S LICENSE INFORMATION**

(Installation Services Only)

Bidder shall complete the applicable contractor's license information below in accordance with the Contractor's State License Board, Department of Consumer Affairs. A Contractor's license of appropriate Class (**Class A, C-7, and C-10**) is required before any Bidder can contract business (e.g. submit a proposal) which includes the installation of cable and wiring, electrical modification. In addition, if structural modifications are required, a Class B license is required.

**CONTRACTOR:**

Class \_\_\_\_\_ License No: \_\_\_\_\_

Licensee: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Note: Business Partner(Firm's Name or a Responsible Managing Employee) must be licensed in addition to all subcontractor(s) performing under this contract.**

**SUBCONTRACTOR 1**

Class \_\_\_\_\_ License No: \_\_\_\_\_

Licensee: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Relationship of Licensee to Contractor: \_\_\_\_\_

**SUBCONTRACTOR 2**

Class \_\_\_\_\_ License No: \_\_\_\_\_

Licensee: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Relationship of Licensee to Contractor: \_\_\_\_\_

(Use additional sheets if necessary.)

**T. EXHIBIT V-G - LIST OF PROPOSED SUBCONTRACTORS (PUBLIC WORKS)**

Listed hereinafter is the name and address of each subcontractor who will be employed and the kind of work which each will perform if the contract is awarded to the aforesigned. I understand that under Government Code Section 4100 through 4113\* (See Note Below) I must here clearly set forth the name and address of each subcontractor who will perform work or labor or render service to me in or about the construction of the work in an amount in excess of one-half of one percent (1/2 of 1%) of the public works portion of my total proposal and that as to any work in which I fail to do so, I agree to perform that portion myself or be subject to penalty under the act.

**(NOTE: IF MORE THAN ONE SUBCONTRACTOR IS LISTED FOR THE SAME TYPE OF WORK, STATE THE PORTION OF THAT TYPE OF WORK THAT THE INDIVIDUAL SUBCONTRACTOR WILL BE PERFORMING. LIST THE SUBCONTRACTORS' APPLICABLE CONTRACTORS LICENSE NUMBER(S), IF AVAILABLE. SUPPLIERS OF MATERIALS ONLY, NEED NOT BE LISTED.)**

If additional space is required for the listing of proposed subcontractors, reproduced additional sheets showing the required information, as indicated below, shall be attached hereto and made a part of the Final Bid proposal.

<b><u>KIND OF WORK</u></b>	<b><u>SUBCONTRACTOR NAME AND ADDRESS</u></b>	<b><u>LICENSE NO.</u></b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**NOTE:** The above listing requirement will for purposes of this proposal be construed in accordance with the provisions of the Subletting and Subcontracting Fair Practices Act ("The Act") as set forth in Public Contract Code Sections 4100 through 4113. Also, for purposes of this proposal and interpretation of The Act, a supplier will be considered to be a prime contractor regardless of whether such supplier is or is not a licensed contractor.

Subsequent to contract award, if a Business Partner desires to add or replace a subcontractor, prior written approval must be obtained from the State in accordance with Public Contract Code Section 4107.

Subcontractors to be used for future additional work defined via a Form 20 (or other form developed by the state) will be listed on that form at the time the work is defined, and not included in this Exhibit.

**U. EXHIBIT V-H - WORKERS' COMPENSATION CERTIFICATION**

**The undersigned in submitting this document hereby certifies the following:**

I am aware of the provisions of Section 3700 of the California Labor Code which requires every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with such provisions before commencing the performance of the work of this contract.

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**Signature**

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**Date**

---

**Name and Title (Print or Type)**

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**Street Address**

---

**Firm Name**

---

**City, State ZIP**

**V. EXHIBIT V-I - Subcontractor List**

For each subcontractor/reseller include:

- Company Name and Address
- Type of Work
- Small Business (Y/N)
- Amount of Work (if small business)

**W. EXHIBIT V-J - Disabled Veteran Business Enterprise Participation Program Requirements**

Public Contract Code Section 10115 establishes a contract participation goal of at least three percent (3%) for disabled veteran business enterprise (DVBE). This goal applies to a state agency's overall contracting program. State agencies have the discretion to apply the DVBE participation goal to individual contracts. DVBE participation requirements are included for this contract. This solicitation attachment provides program information and bidder responsibilities for the DVBE Participation Program. Bidders must meet DVBE Participation Program requirements to be viewed as a responsive bidder and considered for contract award.

**PLEASE READ THESE INSTRUCTIONS CAREFULLY**

Bidders must fully comply with DVBE Participation Program requirements. Failure to submit a complete response may result in a non-responsive determination, in which case the bid will be rejected.

For bid response assistance, please call the contracting official for this contract:

Janis Briggs  
Department of General Services  
Telecommunications Division  
601 Sequoia Pacific Blvd.  
Sacramento, CA 95814  
Phone: (916) 657-9875  
Fax: (916) 657-9129

The Office of Small and Minority Business offers program information and may be reached at:

Department of General Services  
Office of Small and Minority Business  
1531 I Street, Second Floor  
Sacramento, CA 95814-2016  
Homepage: <http://www.dgs.ca.gov/osmb>  
24 hour information and document request system: (916) 322-5060  
Receptionist: (916) 323-5478  
Fax: (916) 442-7855

**DVBE PARTICIPATION PROGRAM COMPLIANCE OPTIONS**

Before you begin to prepare your bid response, you will need to determine which option you will document to meet DVBE Participation Program requirements:

- A. **Commitment to Contract Participation** - Meet or exceed the goal of at least 3% DVBE participation for this solicitation and document that commitment (see page 2 below for instructions). Should efforts result in partial or no participation, you may meet DVBE

Participation Program requirements by documenting your “good faith efforts” to attain DVBE participation for this solicitation (see instructions below).

- B. Business Utilization Plan** - Submit with your bid a copy of your firm’s “Notice of Approved DVBE Business Utilization Plan” (see page 4 for instructions).

NOTE: Business Utilization Plans must address DVBE participation and apply only to procurements for materials, supplies and equipment, including electronic data processing and telecommunication goods and services.

Forms and instruction for Option A are included below. If you are considering using Option B, please call the Department of General Services (DGS), Procurement Division (PD), Small Business Resource Unit for instructions on how to complete and submit a Business Utilization Plan.

### **OPTION A - Commitment to Contract Participation**

Meet or exceed DVBE participation goal of at least 3% for the proposed contract by one of the following two (2) ways:

1. **If you are a non-DVBE bidder:** Commit to use DVBE(s) for at least 3% of the contract bid amount.
2. **If you are a DVBE bidder:** Commit to perform at least 3% of the contract bid amount with your firm or in combination with other DVBE(s).

**To Document DVBE Participation:** Use Disabled Veteran Business Enterprise Participation Summary, Form STD 840, revised.

**For Certification of DVBEs:** OSMB-DVBE certification is the only acceptable certification.

NOTE: All bidders must include the respective certification verification for each participating DVBE subcontractor/supplier, including the bidder when applicable.

Should full goal attainment not be achieved, your “good faith efforts” may be documented to meet DVBE Participation Program requirements prior to the solicitation due date, by completing Exhibit A in its entirety. **Bidders are encouraged to seek at least partial DVBE participation.**

### **Good Faith Efforts**

**NOTE:** All efforts intend to identify and attain DVBE participation.

**Step 1, Outreach, Awarding Department** - Contact the contracting official identified for this solicitation to identify potential DVBE subcontractors/suppliers. Document contact(s) and results on Exhibit A.

**Step 2, Outreach, Other State, Federal and Local Organizations -**

- **State** - Contact the OSMB to identify certified DVBEs at “<http://www.dgs.ca.gov/osmb>” or (916) 322-5060. Document contact and results.
- **Federal** - No contact necessary as no viable federal contacts are currently known.  
NOTE: Awarding departments will require this contact should viable federal contacts

become known.

- **Local** - The OSMB publishes a list of local agencies to assist bidders to meet this requirement. To obtain this list, please contact the OSMB and request the "State Contracting Resource Packet" at "<http://www.dgs.ca.gov/osmb>" or (916) 322-5060. Document request and results. Contact listed local organizations to identify potential DVBE subcontractors/suppliers. Document contact(s) and results on Exhibit A.

**Step 3, Advertisements** - Advertise in at least one trade and one focus publication (minimum two ads). List publication name and advertisement dates on Exhibit A. Include copies of ads with bid.

NOTE: Advertising is mandatory unless the solicitation document specifically waives the requirement due to time constraints. **Advertising, when required, must be published more than 7 days prior to the bid opening date.**

Sample ad content:

(YOUR COMPANY NAME)  
IS SEEKING QUALIFIED  
DISABLED VETERAN BUSINESS ENTERPRISE (DVBE)  
SUBCONTRACTORS &/OR SUPPLIERS  
TO PROVIDE (WHAT) FOR (PROJECT) (LOCATION)  
CONTACT: (NAME, ADDRESS, TELEPHONE, FAX, E-MAIL)  
(SOLICITATION NUMBER)  
BIDS DUE: (DATE/TIME)

In accordance with PCC Section 10115.2(b)(3), bidders must advertise in one trade and one focus publication unless the DVBE goal is satisfied. The OSMB publishes a list of trade and focus publications to assist bidders in meeting these contract requirements. To obtain a list, please contact the OSMB and request the "State Contracting Resource Packet" at:

Department of General Services  
Office of Small and Minority Business  
1531 I Street, Second Floor  
Sacramento, CA 95814-2016  
Homepage: <http://www.dgs.ca.gov/osmb>  
24 hour information and document request system: (916) 322-5060  
Receptionist: (916) 323-5478  
Fax: (916) 442-7855

**Step 4, Invitations to Bid** - Invite identified DVBE subcontractors/suppliers to bid. Steps 1-3 should have produced a list of potential DVBEs.

- **Solicitation Sample** - On a separate piece of paper, include a sample of the solicitation sent (letter, fax, e-mail) or discussed (by phone) with DVBE firms. If contact was by phone, document the conversation, date, time, contact person, and

business opportunities discussed.

- **Bidders List** - On a separate piece of paper, include the list of DVBEs invited to bid.

**Step 5, Consider Responses** - Bidders must consider responding DVBEs for contract participation. Consideration should be based upon business reasons and the same criteria applied to all potential subcontractors/suppliers. List on Exhibit A those firms from your bidders list that responded to your solicitation. Indicate using the word “selected” if a firm was selected for participation or provide the business reason for non-selection.

**NOTE: Firms shown as selected are to be listed on Form STD 840, revised.** If you have exhausted all avenues to attain DVBE bid responses, and no responses were received, indicate “none” on Form STD 840, revised.

### **OPTION B - Business Utilization Plan**

PCC Section 10115.15 permits bidders to submit DVBE Business Utilization Plans to satisfy DVBE Participation Program requirements. The Business Utilization Plans must:

- Be annually approved by the DGS, PD, Small Business Resource Unit and address DVBE participation. The annual approval process includes a prior year compliance evaluation.
- Apply only to procurements for materials, supplies and equipment, including electronic data processing and telecommunications goods and services.
- Address statutory information requirements.
- Be submitted prior to the bid due date and subsequently approved to satisfy DVBE Participation Program requirements.

**NOTE:** DVBE Business Utilization Plans do not satisfy DVBE participation requirements for construction or non-EDP service contracts or contracts having DVBE goals which exceed those contained in the bidder’s approved Business Utilization Plan.

Even with approved Business Utilization Plans, bidders are encouraged to seek full DVBE participation or at least partial DVBE participation and document the efforts on Exhibit A.

Instructions for the preparation and submission of DVBE Business Utilization Plans may be obtained by contacting the DGS, PD, Small Business Resource Unit, 1823 14<sup>th</sup> Street, PO Box 942804, Sacramento CA 94204-0001 or by calling (916) 323-4871.

### **CONTRACT AUDITS**

Contractor agrees that the State or its delegate will have the right to review, obtain, and copy all records pertaining to performance of the contract, including but not limited to reports of payments made to subcontractors during the term of the contract. Contractor agrees to provide the State or its delegate access to its premise, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such books, records, accounts, and other material that may be relevant to a matter under investigation for the purpose of determining compliance with this requirement. Contractor further agrees to maintain such records for a period of three (3) years after final payment under the contract.



## ANSWERS TO FREQUENTLY ASKED QUESTIONS

The following questions are among the most frequently asked regarding DVBE requirements:

**Q: *If I am awarded the contract, either with partial or full goal attainment documented, am I required to use the subcontractor/supplier proposed in my bid?***

**A:** Yes, unless you have requested and received approval from the State for substitution. Written requests should include the person's or firm's name to be substituted, the substitution reason, the reason a non-DVBE subcontractor is proposed, if applicable and describe the business to be substituted including its business status as a sole proprietorship, partnership, corporation or other entity and the certification status of the firm, if any. See California Code of Regulations Section 1896.64 (c ) & (d) for substitution criteria.

The request and the State's approval or disapproval is not to be construed as an excuse for noncompliance with any other provision of the law, including but not limited to the Subletting and Subcontracting Fair Practices Act or any other contract requirements relating to substitution of subcontractors. Failure to adhere to at least the DVBE participation proposed by the successful contractor may be cause for contract termination and recovery of damages under the rights and remedies due the State for default section of the contract(s) and any other penalties provided for by statute.

**Q: *Who notifies the subcontractor when an award is made?***

**A:** Upon award to a prime contractor, the awarding department notifies listed subcontractors of their contract participation. Primes are encouraged to notify their listed subcontractors immediately after an award is made to formalize their business agreements.

**Q: *What happens to bids considered non-responsive to the DVBE Participation Program requirements?***

**A:** Non-responsive bids are rejected. Many are rejected because of:

- incomplete documentation,
- documentation not received by bid due date,
- mathematical error related to the percentages,
- basing goal attainment on workforce composition.

**Q: *If I am a disabled veteran business enterprise, can I meet the 3% contract goals as a single company?***

**A:** Yes.

**Q: *If my bid meets the contract goal and the State decides to make multiple awards to the bid/contract, could my bid be considered non-responsive?***

**A:** No, the State's decision to make multiple awards will not jeopardize bid compliance.

STATE OF CALIFORNIA

**DISABLED VETERAN BUSINESS  
ENTERPRISE PARTICIPATION SUMMARY**

STD. 840 REVISED

**See Completion instructions on reverse**

COMPANY NAME	NATURE OF WORK	CONTRACTING WITH	TIER	CLAIMED DVBE VALUE	CERTIFICATION

STATE OF CALIFORNIA

**DISABLED VETERAN BUSINESS  
ENTERPRISE PARTICIPATION SUMMARY**

STD. 840 REVISED

**COMPLETION INSTRUCTIONS**

THIS FORM **MUST** BE COMPLETED WHETHER THE CONTRACT GOALS ARE ACHIEVED OR A "GOOD FAITH EFFORT" IS MADE AND DOCUMENTED. IF NO PARTICIPATION IS OBTAINED, STATE "N/A" OR "NONE." FULL AND PARTIAL GOAL ACHIEVEMENT SHOULD BE REPORTED.

**COMPANY NAME** - list the name of the company proposed for DVBE participation. If the prime contractor is a DVBE, the name **MUST** be listed for participation.

**NATURE OF WORK** - identify the proposed work to be performed by the prime contractor or subcontractors.

**CONTRACTING WITH** - list the name of the department or company with which the company listed is contracting.

**TIER** - the contracting tier should be indicated with the following level designations:

0=Prime or Joint Contractor

1=Primary Subcontractor/Supplier

2=Subcontractor/Supplier of Level 1 Subcontractor/Supplier

3=Subcontractor/Supplier of Level 2 Subcontractor/Supplier, etc.

**CLAIMED DVBE VALUE** - the total participation dollar amount claimed by a disabled veteran business enterprise (DVBE) for this bid.

**CERTIFICATION** - to obtain DVBE participation credit, the firm must be formally certified by the Office of Small and Minority Business. Check "yes" if the certification verification has been included for each firm listed for participation.

**SOLICITATION NO.**\_\_\_\_\_ **CONTRACTOR/BIDDER:**\_\_\_\_\_**GOOD FAITH EFFORT DOCUMENTATION**

This form is provided to document outreach, solicitations and consideration given to DVBEs.

**Step 1 - Contact awarding department to identify potential DVBE subcontractors/suppliers.**

**Step 2 - Contact other state, federal and local organizations to identify potential DVBE subcontractors/suppliers.**

<u>Date/Time</u>	<u>Agency/Organization Name</u>	<u>Contact Person/Method</u>	<u>Telephone Number/ Internet Address</u>	<u>Contact Results</u>
_____	<u>Procurement Division</u>	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

SOLICITATION NO. \_\_\_\_\_ CONTRACTOR/BIDDER: \_\_\_\_\_

### GOOD FAITH EFFORT DOCUMENTATION

**Step 3 - Advertisements** - List publications in which you advertised to identify potential DVBE subcontractors/suppliers (include a copy of each advertisement with bid). List publication dates for each advertisement.

Publication Name

Publication Date(s)

_____	_____
_____	_____
_____	_____
_____	_____

**Step 4 - Invitations to Bid -**

**a) Solicitation Copy:** Attach a solicitation copy sent to potential DVBE subcontractors/suppliers. If multiple solicitations methods were used attach a solicitation copy for each method. If phone contacts were made, document the conversations: date, time, contact person, and business opportunities discussed.

**Bidders List:** Attach a list of all DVBEs solicited. If multiple solicitation methods were used indicate method used for each.

**SOLICITATION NO.**\_\_\_\_\_ **CONTRACTOR/BIDDER:**\_\_\_\_\_**GOOD FAITH EFFORT DOCUMENTATION**

**Step 5 - Consider DVBE responses** - List below the DVBEs responding to your solicitation. If selected for participation, write in "selected" or the business reason for non-selection. Use additional pages as needed. If you have exhausted all resources and received no responses, please indicate "none".

DVBE NameSelected/Business Reason for Non-Selection

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____